

**Wyoming Department of Health
Mental Health and Substance Abuse Services Division
MHSASD**

Crisis Stabilization Program Funding Application

**Fiscal Years (FY) 2009 – 2010
Deadline: 5:00PM May 16, 2008**

Instructions:

1. Please use 12 Times New Roman font and either allow for 1.5 space or double space.
2. Compile the application in order, adding requested materials for each section as applicable.
3. Applications will be scored on the points assigned to each section.
4. Return the completed application to the following address, to be received no later than 5:00 PM, May 16, 2008.

Rodger McDaniel
Deputy Director
Mental Health and Substance Abuse Services Division
6101 Yellowstone Road, Room 220
Cheyenne, Wyoming 82002-0480

Questions about the application, please contact Laura Griffith @ 307-777-3364 or laura.griffith1@health.wyo.gov

An optional conference call to address questions regarding the application will be held April 11, 2008 at 2 p.m. The call in number is: 1-877-278-8686. PIN: 592552

II. PROJECT DESCRIPTION

1. BACKGROUND

The Wyoming State Legislature, during the 2008 Legislative Session, authorized funding for the expansion of Crisis Stabilization services. Crisis Stabilization services are designed to assist individuals in need of acute intervention and treatment services with the goal of reducing State Hospital utilization and providing services as close to the client's home as possible. Crisis Stabilization services will be operated in one or two of the State's five Comprehensive Care Regions map defining each of the five regions may be found in Attachment A.

The success of the Crisis Stabilization Program depends upon the integration of the services into the broad existing continuum of care so that individuals receive effective treatment in the least restrictive environment possible. The continuum of care includes, but is not limited to, these characteristics:

- Service systems are driven by the needs and preferences of the patient and family, and they address these needs through a strength-based approach;
- The focus and management of services occurs within a multi-disciplinary and multi-agency collaborative environment and is grounded in a strong community base;
- The services offered, the agencies participating and the programs generated, are responsive to the cultural context and characteristics of the populations served;
- Families and consumers are partners in the planning, implementing and evaluating of the system of care.

There is an expectation that the successful applicant(s) will participate in the development of Crisis Intervention Team(s) within their regions, collaborate with Crisis Intervention Team participants and act as a resource for the Team.

Service Definition

Crisis stabilization services are provided in a readily accessible, safe, short-term community based environment and include appropriate services to stabilize clients with serious mental illness, and co-occurring mental health and substance abuse disorders who decompensate or are in crisis. The goals of the Crisis Stabilization Program are to reduce unnecessary hospitalizations, emergency detentions, and incarceration by dealing with symptoms of decompensation proactively, preventing them from worsening, removing barriers to supports and reducing the trauma associated with crises while minimizing disruption to an individual's relationships and community roles. Crisis stabilization services can also be used as a "step-down" or transitional service for individuals who are returning to a community following a stay at the Wyoming State Hospital or other inpatient facility. Services must include a residential capacity staffed 24 hours a day, 7 days a week with the availability of medical backup as needed. Mobile teams and in-home services can also be provided, based on individual client need. Individuals requiring detoxification are not suitable for crisis intervention services.

Application Overview

The Wyoming Department of Health, Mental Health and Substance Abuse Services Division (the Division) is soliciting competitive, responsive, regional applications from Community Mental Health Centers to develop and operate a Crisis Stabilization Program. The Division envisions a consortium of Community Mental Health Centers within a region, teaming together to address the needs of the region in the Application for this Crisis Stabilization Program. The Division expects that this consortium arrangement will be managed by a lead agency or provider, responsible for the planning and ongoing operation of the Crisis Stabilization Program. Additionally, the agency or provider will be the fiduciary

agent and will be responsible for developing and submitting the responses to this application and executing agreements with other agencies within the region to ensure continuity of care.

A total of \$800,000.00 per year is available under this application to fund up to at least one and possibly two (2) Crisis Stabilization Programs in different regions.

2. ELIGIBLE POPULATION

Residents of the State of Wyoming meeting the clinical requirements described in the Scope of Work shall be eligible to receive services through the Crisis Stabilization Program. However, the Contractor should give priority to persons who are seriously and persistently mentally ill, seriously mentally ill, have co-occurring disorders and others with a mental disorder. Applicants should describe in their application the specific population(s) they expect to serve as part of their proposed program.

All individuals receiving services through the Crisis Stabilization Program will be charged for services based on their ability to pay. Applicants should refer to the sliding fee schedule for services to be provided through the Crisis Stabilization Program. This can be found at:

<http://wdh.state.wy.us/mhsa/treatment/SlidingFeeScale.html>

3. SCOPE OF WORK

Crisis Stabilization Project

3.1 Requirements for Services

As described in Section 1 of the application, the success of the Crisis Stabilization Program depends upon the successful integration of the services into the broad existing continuum of care to enable eligible individuals to receive effective treatment in the least restrictive environment possible. Contractors shall coordinate with appropriate community and/or regional agencies to develop a continuum of care plan for each individual receiving services through the Crisis Stabilization Program. The plans should include the following:

- Identify the services (e.g. clinical care, educational and vocational support, job placement support, financial counseling and other community living support services) that clients will have access to that support the ability to remain in the community and create the linkages to established services with community mental health;
- Establish achievable short- and long-term goals for clients that are consistent and compatible with the diagnosis, internal and external resources and abilities of the client;
- Identify and create appropriate links to required services and resources that support the clients' ability to remain within the community, without undue waiting or barriers.

The Contractor shall address in its proposal admission and discharge criteria and description of how continuing care will be addressed through linkages with regional, state service providers and the Wyoming State Hospital. Applicants shall provide in their proposed approach a description of methodologies that will assure appropriate coordination with existing social detox, local and statewide mental health services, Crisis Intervention Teams and other regional/community resources.

The Applicant's proposal must provide a detailed narrative describing its approach to providing the crisis stabilization services which reflects the identified needs of the region. The Applicant must describe their plans to coordinate Crisis Intervention Services with local and regional service providers, law enforcement agencies and provide an assurance that their stakeholders will participate in the proposed Crisis Intervention Team training and development within their

region. Information on Crisis Intervention Teams is included as Attachment B. The application should demonstrate the Applicant's ability to provide linkage to other needed services and demonstrate how the Applicant will address each of the service requirements as described below. The proposal must also include a description of the Applicant's approach to staffing, including a description of the composition and qualifications of the staff and proposed staffing ratios.

Additionally, the narrative must describe how the Applicant will provide the service in the context of the broader continuum of care, including how it will coordinate with the community mental health case management system, social detox services, Crisis Intervention Teams, appropriate community and/or regional agencies, and the Wyoming State Hospital to develop a continuum of care plan for each individual receiving services through the Crisis Stabilization Program.

Contractor Requirements

The Contractor is required to provide the following:

- Crisis home or apartment(s) with supervision and wrap-around services provided at the intensity necessary to support the individual in crisis resolution and stabilization.
- Wrap-around services at the level or intensity necessary to support stabilization and crisis resolution. Services include assessment and evaluation, access to psychiatric services, medication management, individual therapy, case management, Individual Rehabilitation Services skill training, and linkages to other appropriate services and discharge planning. The array of services provided shall be based on the individual treatment plan.
- Linkages with law enforcement, Crisis Intervention Teams, and providers of mental health emergency services including after hour crisis services. The Contractor must demonstrate a focus on community outreach and responsiveness to emergencies which may include the utilization of mobile crisis teams.
- Utilization of services as a "step down" from acute inpatient care for those clients who require additional supports prior to full integration back into the community.
- The Contractor must demonstrate how crisis stabilization services are integrated into the continuum of care, how linkages to other services provided by the public mental health system of care are included in the plans and how crisis services will be utilized to prevent admission to more restrictive levels of care.
- Adequate staffing, in terms of numbers and professional qualifications, to provide crisis intervention services.
- The applicant must provide assurances that data and outcome measures will be collected and reported consistent with current Wyoming Client Information System (WCIS) data sets. Monitoring of the services provided will be conducted by the Division and will be consistent with monitoring activities currently being developed for other Division purchased services.

- 3.1.1 **Financial Reporting Requirements.** The Contractor shall report the financial information to the Division through monthly or quarterly expenditure reports as provided by the Mental Health and Substance Abuse Services Division.

4. SCHEDULE OF EVENTS

| Event Description | Date |
|-------------------------------------|-------------------------------|
| Application Released | April 11, 2008 |
| Optional Proposers' Conference Call | April 18, 2008, 2:00 p.m. MDT |
| Proposers' Questions Due | April 25, 2008 |
| Responses to Questions Returned | May ,1 2008 |
| Proposal Submission Deadline | May 16,2008 |
| Anticipated Contract Award | May 23,2008 |
| Program Start Date | July 1, 2008 |

5. APPLICATION QUESTIONS

Questions regarding this application must be in writing and submitted by April 25, 2008 at 5:00 p.m. MDT to:

Division of Mental Health
Laura Griffith Community Services & Treatment Manager
6101 Yellowstone Road, Room 220
Cheyenne, WY 82002
(307) 777-3364
Fax: (307) 777-5580
Email: laura.griffith1@health.wyo.gov

6. APPLICANT'S CONFERENCE

An optional Applicant's Conference will be held via conference call on April 18, 2008 at 2:00 p.m. MDT. Interested Applicants may participate by dialing: 1-877-278-8686 and entering PIN 530352.

7. APPLICATION SUBMISSION REQUIREMENTS

Overview

This section of the application outlines the format and content requirements for the Application and Cost Proposals. Failure to respond to a specific requirement may result in exclusion of the application from further consideration or result in a score of zero (0) for that item.

Submit proposals to the following address:

Rodger McDaniel
Deputy Director
Wyoming Department of Health
Mental Health and Substance Abuse Services Division
6101 Yellowstone Road, Room 220
Cheyenne, Wyoming 82002-0480

7.1 Application must be received by 5:00 pm on May 16, 2008.

7.2 Application Requirements

The application shall contain the following sections:

- Cover Page
- Table of Contents
- Executive Summary
- Approach to Contract Performance
- Proposed Personnel
- Qualifications
- Attachments (Optional)

The format and contents of the material to be included under each of these headings are described below. The application should be provided in the same order. The Cost Proposal should be included as a separate sheet.

7.2.1 **Cover Page.** The cover page should identify the Applicant's name. Applicant name and primary contact information (name, address, telephone and fax numbers and e-mail address).

7.2.2 **Executive Summary.** The Executive Summary shall condense and highlight the contents of the application in such a way as to provide evaluators with a broad understanding of the entire proposal. It must contain a narrative description of the Applicant's proposed approach, emphasizing the most important features in delivering these services to clients of Wyoming's mental health system.

The Executive Summary shall summarize the Applicant's understanding of the scope of work, the qualifications of key personnel, the identity and qualifications of any subcontractor personnel or organizations, highlights of its quality assurance program and utilization review mechanisms, and the capability of the Applicant's organization to handle the requirements of this contract.

7.2.3 **Approach to Contract Performance.** This section of the application shall provide a detailed narrative of the Applicant's proposed approach to providing the services and meeting the requirements described in Section 3, Scope of Work. The approach must also contain a proposed timeline for the full implementation of the required services. The Division prefers that all facets of the program be up and running by September 1, 2008.

7.2.4 **Applicant's Personnel.** This section of the application shall identify key staff to be utilized on this contract, their roles, and their qualifications to perform these responsibilities.

Key Staff

This section shall identify the key staff for the Applicant and all other contracting agencies to be utilized on this contract, as well as their roles and qualifications to perform the stated responsibilities of the Contractor. The Applicant shall provide a thorough discussion of the roles and responsibilities of each of the members of the professional staff and describe accountabilities for management of patient cases and processes of care.

Staff Replacement and Training

The Applicant shall address the issue of staff replacement and training with a commitment to maintaining the required level of service. The Contractor shall provide notification of any changes in key staffing to the Division.

Other Staff

Other staff needed to support the Crisis Stabilization Program shall be described in terms of the number and types of personnel needed, and their responsibilities related to the services under this contract.

7.2.5 Qualifications and Organizational Structure. This section of the application shall identify the Applicant's experience and outcomes in providing mental health services. In addition, the Applicant must submit documentation or evidence of the following if not already on file at the Division:

- Documentation of CARF accreditation
- Credentials of those most closely involved with the provision of services in the Crisis Stabilization Program.

The Applicants shall also provide written agreements between the Applicant and all other Community Mental Health Centers within the region. Applicants must also submit data supporting the financial soundness of their organizations for the past two years, if not already on file with the Division.

7.2.6 Attachments. This section of the application is optional and may include any additional materials that Applicant would like to submit in support of its application.

8. COST PROPOSAL REQUIREMENTS

Applicants are required to submit the attached Application Price Sheet as part of their Cost Proposal. The Cost Proposal should include a detailed line item budget, identifying all costs associated with providing crisis stabilization services. Applicants should also include a narrative describing any assumptions used in the Cost Proposal.

9. APPLICATION EVALUATION CRITERIA

The following criteria will be used to evaluate the Applicant's proposals:

- Demonstrated experience with providing mental health services. 20 Points
- Proposed approach to providing Crisis Stabilization Program services and integrating these services into the broader continuum of care. Consideration will be made for the level of innovation and creativity of the Applicant's proposed approach to providing services to individuals in need. 40 Points
- Demonstrated ability to establish, implement and continuously monitor program quality and effectiveness over time. 30 Points
- Proposed cost. 10 Points
- Total Possible Points: 100

The State of Wyoming will be the sole judge with respect to the evaluation of applications. The application which best meets the conditions of each of the individual criterion will be awarded the highest (not necessarily maximum) points for that specific criterion. The balance of the Applicants will be rated based on their evaluated points. After each criterion is evaluated, the Applicant with the highest total number of points will be awarded the contracts.

III. APPLICATION PRICE SHEET

The undersigned agrees to provide mental health services related to the Crisis Stabilization Program to the Wyoming Department of Health, Mental Health and Substance Abuse Service Division in accordance with the Application, General Provisions, Special Provisions and Price Sheet for Application

| Service Area | Price |
|--|-------|
| Crisis Stabilization Program | |
| <Detail> | |
| <Detail> | |
| <Detail> | |
| Total Proposed Price for Crisis Stabilization Program | |

1. BY SUBMISSION OF AN APPLICATION THE APPLICANT CERTIFIES:

- 1.1 Prices in this application have been arrived at independently, without consultation, communication or agreement for the purpose of restricting competition.
- 1.2 No attempt has been made nor will be by the Applicant to induce any other person or firm to submit an Application for the purpose of restricting competition.
- 1.3 The person signing this application certifies that he/she is authorized to represent the company and is legally responsible for the decision as to the price and supporting documentation provided as a result of this advertisement.
- 1.4 Applicants will comply with all Federal regulations, policies, guidelines and requirements.
- 1.5 Prices in this application have not been knowingly disclosed by the Applicant and will not be prior to award to any other Applicant.

2. GENERAL INFORMATION:

Applicant's Name _____ Phone () _____

FAX () _____

Mailing Address _____

City _____ State _____ Zip _____

SSN/Employer Identification Number _____

3. OWNERSHIP AND CONTROL:

Applicant's Legal Structure:

_____ Sole Proprietorship

_____ General Partnership

_____ Corporation

_____ Limited Partnership

_____ Limited Liability

_____ Other _____

If Applicant is a sole proprietorship, list:

Owner Name _____ Phone () _____

Mailing Address _____

City _____ State _____ Zip _____

SSN/Employer Identification Number _____

Beginning date as owner of sole proprietorship _____

Provide the names of all individuals authorized to sign for the Applicant:

NAME (printed or typed)

TITLE

VERIFICATION

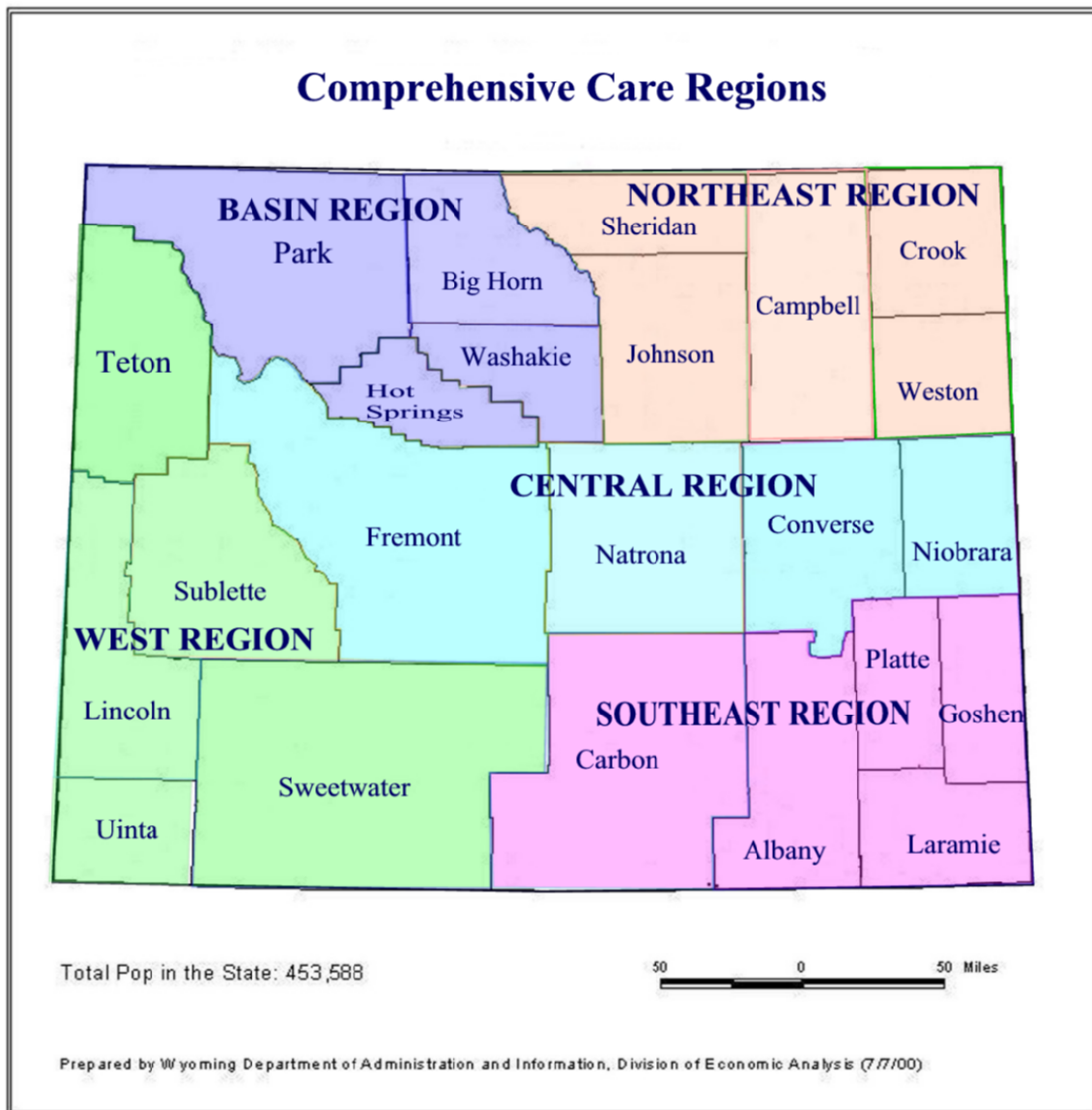
I certify under penalty of perjury, that I am a responsible official (as identified above) for the business entity described above as Applicant, that I have personally examined and am familiar with the information submitted in this disclosure and all attachments, and that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including criminal sanctions which can lead to imposition of a fine and/or imprisonment.

(Signature)

(Name and Title) (Typed or Printed)

(Date)

ATTACHMENT A



ATTACHMENT B

Crisis Intervention Team Toolkit CIT Facts

*NAMI - National Alliance on Mental Illness • 2107 Wilson Blvd., Suite 300 • Arlington, VA • 22201-3042
(703)524-7600 • Helpline: 1(800)950-NAMI (6264) • www.nami.org*

What is CIT?

Crisis Intervention Teams (CIT) are a pre-booking jail diversion program designed to improve the outcomes of police interactions with people with mental illnesses.

The first CIT was established in Memphis in 1988 after the tragic shooting by a police officer of a man with a serious mental illness. This tragedy stimulated collaboration between the police, the Memphis chapter of the National Alliance on Mental Illness, the University of Tennessee Medical School and the University of Memphis to improve police training and procedures in response to mental illness. The Memphis CIT program has achieved remarkable success, in large part because it has remained a true community partnership. Today, the so-called “Memphis Model” has been adopted by hundreds of communities in more than 35 states, and is being implemented statewide in Ohio, Georgia, Florida, Utah, and Kentucky. To locate a CIT program near you, visit the University of Memphis website at: <http://www.cit.memphis.edu/USA.htm>.

The Memphis Model of CIT has several key components:

- ♦ **A community collaboration** between mental health providers, law enforcement, and family and consumer advocates. This group examines local systems to determine the community’s needs, agrees on strategies for meeting those needs, and organizes police training. This coalition also determines the best way to transfer people with mental illness from police custody to the mental health system, and ensures that there are adequate facilities for mental health triage.
- ♦ **A 40 hour training program** for law enforcement officers that includes basic information about mental illnesses and how to recognize them; information about the local mental health system and local laws; learning first-hand from consumers and family members about their experiences; verbal de-escalation training, and role-plays.
- ♦ **Consumer and family involvement** in decision-making, planning training sessions, and leading training sessions.

Why Do We Need CIT?

CIT equips police officers to interact with individuals experiencing a psychiatric crisis, by:

- ♦ **Providing specialized training.** Police officers report that they feel unprepared for “mental disturbance” calls and that they encounter barriers to getting people experiencing psychiatric symptoms quickly and safely transferred to mental health treatment. CIT addresses this need by providing officers with specialized training to respond safely and quickly to people with serious mental illness in crisis. Officers learn to recognize the signs of psychiatric distress and how to deescalate a crisis — avoiding officer injuries, consumer deaths and tragedy for the community. In addition, CIT officers learn how to link people with appropriate treatment, which has a positive impact on fostering recovery and reducing recidivism.